

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
<i>Company Tracking Number:</i>	<i>2008-112</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>112-Auto Rule</i>		
<i>Project Name/Number:</i>	<i>112-Auto Rule/2008-112</i>		

Filing at a Glance

Companies: GEICO Indemnity Company, GEICO Casualty Company, GEICO General Insurance Company, Government Employees Insurance Company

Product Name: 112-Auto Rule	SERFF Tr Num: GECC-125778762	State: Arkansas
TOI: 19.0 Personal Auto	SERFF Status: Closed	State Tr Num: EFT \$100
Sub-TOI: 19.0001 Private Passenger Auto (PPA)	Co Tr Num: 2008-112	State Status: Fees verified and received
Filing Type: Rule	Co Status:	Reviewer(s): Alexa Grissom, Betty Montesi, Brittany Yielding
	Author: Christina Puglisi	Disposition Date: 09/02/2008
	Date Submitted: 08/29/2008	Disposition Status: Filed
Effective Date Requested (New): 09/07/2008		Effective Date (New): 09/29/2008
Effective Date Requested (Renewal): 09/07/2008		Effective Date (Renewal):
State Filing Description:		

General Information

Project Name: 112-Auto Rule	Status of Filing in Domicile: Pending
Project Number: 2008-112	Domicile Status Comments:
Reference Organization: NA	Reference Number: NA
Reference Title: NA	Advisory Org. Circular: NA
Filing Status Changed: 09/02/2008	
State Status Changed: 09/02/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

For your review, Government Employees Companies herewith files a revision to our Automobile Casualty Manual currently on file.

Specifically, we have revised the Installment Payment Plan rule to include two new payment plans to policyholders, each offering six installment payments during the six-month policy term.

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>112-Auto Rule</i>		
<i>Project Name/Number:</i>	<i>112-Auto Rule/2008-112</i>		

Enclosed are revised manual pages. No pages are enclosed for GEICO General Insurance Company as we maintain a special page (GG-1) that states GEICO General rates and rules are identical to GEICO's.

Upon receipt of the enclosed, please forward your stamped acknowledgment for our records. We will implement this change for all policies effective on and after September 29, 2008.

Company and Contact

Filing Contact Information

Maria Papagjika, Analyst, State Filings	mpapagjika@geico.com
One GEICO Plaza	(301) 986-3792 [Phone]
Washington, DC 20076	(301) 986-3922[FAX]

Filing Company Information

GEICO Indemnity Company	CoCode: 22055	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 52-0794134	

GEICO Casualty Company	CoCode: 41491	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 52-1264413	

GEICO General Insurance Company	CoCode: 35882	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 75-1588101	

Government Employees Insurance Company	CoCode: 22063	State of Domicile: Maryland
4608 Willard Avenue	Group Code: 31	Company Type:
Chevy Chase, MD 20815	Group Name:	State ID Number:
(800) 824-5404 ext. [Phone]	FEIN Number: 53-0075853	

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
<i>Company Tracking Number:</i>	<i>2008-112</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>112-Auto Rule</i>		
<i>Project Name/Number:</i>	<i>112-Auto Rule/2008-112</i>		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$100.00
Retaliatory?	No
Fee Explanation:	\$100 per filing.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
GEICO Indemnity Company	\$0.00	08/29/2008	
GEICO Casualty Company	\$0.00	08/29/2008	
GEICO General Insurance Company	\$0.00	08/29/2008	
Government Employees Insurance Company	\$100.00	08/29/2008	22215824

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
<i>Company Tracking Number:</i>	<i>2008-112</i>		
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<i>Product Name:</i>	<i>112-Auto Rule</i>		
<i>Project Name/Number:</i>	<i>112-Auto Rule/2008-112</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	09/02/2008	09/02/2008

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
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<i>Project Name/Number:</i>	<i>112-Auto Rule/2008-112</i>		

Disposition

Disposition Date: 09/02/2008
Effective Date (New): 09/29/2008
Effective Date (Renewal):
Status: Filed
Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

SERFF Tracking Number:	GECC-125778762	State:	Arkansas
First Filing Company:	GEICO Indemnity Company, ...	State Tracking Number:	EFT \$100
Company Tracking Number:	2008-112		
TOI:	19.0 Personal Auto	Sub-TOI:	19.0001 Private Passenger Auto (PPA)
Product Name:	112-Auto Rule		
Project Name/Number:	112-Auto Rule/2008-112		

Item Type	Item Name	Item Status	Public Access
Supporting Document	A-1 Private Passenger Auto Abstract	Filed	Yes
Supporting Document	APCS-Auto Premium Comparison Survey	Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	Uniform Transmittal Document-Property & Casualty	Filed	Yes
Rate	GE-GG General Rules	Filed	Yes
Rate	GI General Rules	Filed	Yes
Rate	GC General Rules	Filed	Yes

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
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Rate Information

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>GECC-125778762</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>GEICO Indemnity Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
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<i>Project Name/Number:</i>	<i>112-Auto Rule/2008-112</i>		

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	GE-GG General Rules	Page 3	Replacement	GE-GG General Rules.pdf
Filed	GI General Rules	Page 3	Replacement	GI General Rules.pdf
Filed	GC General Rules	Page 2	Replacement	GC General Rules.pdf

**GOVERNMENT EMPLOYEES INSURANCE COMPANY
GENERAL RULES SECTION
ARKANSAS**

RULE 5. AUTOMOBILE INSTALLMENT PAYMENTS (Cont'd)

- *B. The due date of the last installment shall not be less than one month prior to the expiration.
- C. An additional charge of \$4.00 shall be made for each installment including the first payment, and the additional charge shall be included in each installment payment. For Electronic Fund Transfer payments made under a recurring payment plan, a \$1.00 charge applies in lieu of \$4.00. For payments made under a recurring credit card plan offered pursuant to a sponsorship agreement between the issuing bank and the Company or its affiliates, no installment fee charge shall apply.
- D. The premium paid to the company exclusive of the total installment charge shall never be less than the pro rata charge from the effective date of the policy to the due date of the next installment where additional installments are to be paid, or to expiration of the policy where no further installments are due.

The rule does not preclude the use of an installment payment plan which provides for deferring the due date of installments where the insurance, for which the installment is due, is under suspension on the original due date.

RULE 6. CANCELLATION AND CHANGES

A. CANCELLATION

All cancellations at the request of the insured or cancellations by the company shall be processed on a pro rata basis.

B. CHANGES

1. All changes requiring adjustments of premium shall be computed on a pro rata basis of the rate in effect when the coverage was issued.
2. When a vehicle or form of coverage is cancelled from the policy at the insured's request and then reinstated within thirty days, the premium for such reinstatement shall be the amount that was returned to the insured at the time of the cancellation.
3. If a vehicle is added or if a form of coverage is added for a policy written for less than one year, premium for the additional insurance shall be pro rata based on rates in effect at the time the change is made.
4. If as a result of any endorsement, amendment, cancellation or other policy change an additional or return premium in an amount less than \$2.00 is developed, no return need be made unless requested by the insured. If requested, the actual amount shall be returned.

**GOVERNMENT EMPLOYEES INSURANCE COMPANY
GENERAL RULES SECTION
ARKANSAS**

RULE 7. SUSPENSION

- A.** All coverages except Comprehensive can be suspended.
- B.** Liability coverages may not be suspended for risks for which a certified financial responsibility filing is in effect.
- C.** Insurance may be suspended by endorsement in accordance with the following provisions provided the period of suspension is at least thirty (30) consecutive days:
 - 1.** Insurance may be reinstated upon the named insured's request effective not earlier than receipt of such request by the company or any of its authorized representatives.
 - 2.** The reinstatement endorsement shall not extend the policy beyond its original expiration date.
 - 3.** Pro rata premium credit shall be granted for the period of suspension upon reinstatement. Companies can retain a minimum of ninety days premium calculated on a pro rata basis.
 - 4.** If the policy expires during the period of suspension, the named insured shall be entitled to pro rata return premium in accordance with the foregoing provisions of this rule with respect to the minimum period of suspension and minimum premium retention by the company.
- D.** If liability and/or collision coverage are suspended, coverage for which separate premiums apply including comprehensive, uninsured motorists coverage, underinsured motorists coverage, medical payments coverage, non-owned auto coverage - may be continued in force without premium adjustment for these coverages.

RULE 8. RESERVED FOR FUTURE USE

RULE 9. FIRE, THEFT, AND COMBINED ADDITIONAL COVERAGE

- A.** Fire, Theft and Combined Additional written as Consolidated Coverage.
- B.** Fire - Written as Personal Effects.

RULE 10. RATES

ALL RATES IN THIS MANUAL UNLESS OTHERWISE STATED ARE ANNUAL PREMIUMS.

**GEICO INDEMNITY COMPANY
GENERAL RULES SECTION
ARKANSAS**

RULE 5. AUTOMOBILE INSTALLMENT PAYMENTS

The following rules govern the payment of automobile premiums for policies written for periods of not more than one year.

The total premium for an automobile policy providing any coverage is due and payable at the beginning of the policy period, unless the policy is issued on an installment payment basis.

The premium for a policy providing automobile Bodily Injury Liability, Property Damage Liability, Physical Damage or other Miscellaneous Coverages may be paid in installments in accordance with the following:

- A.** The first installment shall be due in accordance with the initial billing notice for the policy.
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- C.** An additional charge of \$4.00 shall be made for each installment including the first payment, and the additional charge shall be included in each installment payment. For Electronic Fund Transfer payments made under a recurring payment plan, a \$1.00 charge applies in lieu of \$4.00. For payments made under a recurring credit card plan offered pursuant to a sponsorship agreement between the issuing bank and the Company or its affiliates, no installment fee charge shall apply.
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**GEICO INDEMNITY COMPANY
GENERAL RULES SECTION
ARKANSAS**

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RULES 8. RESERVED FOR FUTURE USE

RULE 9. FIRE, THEFT AND COMBINED ADDITIONAL COVERAGE

- A.** Fire, Theft and Combined Additional - written as Consolidated Coverage.
- B.** Fire written as Personal Effects.

RULE 10. RATES

All rates in this manual are annual premiums unless otherwise stated.

**GEICO CASUALTY COMPANY
GENERAL RULES SECTION
ARKANSAS**

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**GEICO CASUALTY COMPANY
GENERAL RULES SECTION
ARKANSAS**

RULE 1. COVERAGES

Automobiles rated in accordance with this manual shall be afforded Bodily Injury Liability, Property Damage Liability and Protection Against Uninsured Motorist Coverage if it is an automobile of the Private Passenger or Station Wagon, not used as a public or livery conveyance, or an automobile of the truck type with a load capacity of 2000 or less.

Refer to the policy contract for provisions applicable to Territorial Extent of Coverage, Coverage Definitions and Coverage Exclusions.

RULE 2. DETERMINATION OF RATING TERRITORY - ALL COVERAGES

The premium for automobile coverage is the premium shown for the rating territory in which the automobile is principally garaged. (Refer to Rate Section for Territory Definitions). All licensed GEICO Casualty agents and employees will obtain and verify the physical, principal garaged location of the insured risk during the course of business. This directive is intended to ensure the accurate reporting of premiums by cities and towns for the purpose of tax allocation in accordance with Directive number 2-95

RULE 3. POLICY PERIOD - TERM RULE

All policies are written for a period of six (6) months. The premium shall be 50% of the one year premium. Charge the six-month term premium or the minimum premium, whichever applies.

NOTE: If such policies take effect on the 30th or 31st and there is no corresponding date in the sixth subsequent month, the initial policy will expire at the end of the sixth month. The subsequent policy will commence on the first day of the following month.

RULE 4. RESERVED FOR FUTURE USE

RULE 5. AUTOMOBILE INSTALLMENT PAYMENTS

The following rules govern the payment of automobile premiums for policies written for periods of not more than one year.

The total premium for an automobile policy providing any coverage is due and payable at the beginning of the policy period, unless the policy is issued on an installment payment basis.

The premium for a policy providing automobile Bodily Injury Liability, Property Damage Liability, Physical Damage or other Miscellaneous Coverages may be paid in installments in accordance with the following:

A. The first installment shall be due in accordance with the initial billing notice for the policy.

***B.** The due date of the last installment shall not be less than one month prior to the expiration.

SERFF Tracking Number:	GECC-125778762	State:	Arkansas
First Filing Company:	GEICO Indemnity Company, ...	State Tracking Number:	EFT \$100
Company Tracking Number:	2008-112		
TOI:	19.0 Personal Auto	Sub-TOI:	19.0001 Private Passenger Auto (PPA)
Product Name:	112-Auto Rule		
Project Name/Number:	112-Auto Rule/2008-112		

Supporting Document Schedules

Bypassed -Name:	A-1 Private Passenger Auto Abstract	Review Status:	Filed	09/02/2008
Bypass Reason:	N/A -Rule Change only			
Comments:				
Bypassed -Name:	APCS-Auto Premium Comparison Survey	Review Status:	Filed	09/02/2008
Bypass Reason:	N/A - Rule Change only			
Comments:				
Bypassed -Name:	NAIC loss cost data entry document	Review Status:	Filed	09/02/2008
Bypass Reason:	N/A - Rule Change only			
Comments:				
Bypassed -Name:	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Review Status:	Filed	09/02/2008
Bypass Reason:	N/A - Rule Change only			
Comments:				
Satisfied -Name:	Uniform Transmittal Document- Property & Casualty	Review Status:	Filed	09/02/2008
Comments:				
Attachments:				
	Change Sheet.pdf			
	Filing Memo.pdf			
	Cover Letter.pdf			
	PC TD1.pdf			

GOVERNMENT EMPLOYEES INSURANCE COMPANY
GEICO GENERAL INSURANCE COMPANY

AUTOMOBILE

ARKANSAS - CHANGE SHEET

General Rule Section

Revised page 3 replaces current page
of same number currently on file.

File # 2008-112

Effective: 9/29/2008 NB & RNL

GEICO INDEMNITY COMPANY
AUTOMOBILE
ARKANSAS - CHANGE SHEET

General Rule Section

Revised page 3 replaces current page
of same number currently on file.

File # 2008-112

Effective: 9/29/2008 NB & RNL

GEICO CASUALTY COMPANY

AUTOMOBILE

ARKANSAS - CHANGE SHEET

General Rule Section

Revised page 2 replaces current page
of same number currently on file.

File # 2008-112

Effective: 9/29/2008 NB & RNL

**GOVERNMENT EMPLOYEES INSURANCE COMPANY
GEICO GENERAL INSURANCE COMPANY
GEICO INDEMNITY COMPANY
GEICO CASUALTY COMPANY**

ARKANSAS

FILING MEMORANDUM

We propose to begin offering two new payment plans to policyholders, each offering six installment payments during the six-month policy term. In addition to current payment plans, premium may be paid in installments in accordance with the following:

- Monthly with GEICO Auto Pay Payment Plan – EFT or Recurring Card enrollment is required to start and maintain this plan
 - 1st Payment – 16.66% due with application.
 - 2nd Payment – 16.66% is due 30 days after policy effective date.
 - 3rd Payment through 6th Payment – 16.66% due every 30 days thereafter (for 6 month policies).
- Monthly without GEICO Auto Pay Payment Plan
 - 1st Payment – 16.66% due with application.
 - 2nd Payment – 16.66% is due 15 days after policy effective date.
 - 3rd Payment through 6th Payment – 16.66% due every 30 days thereafter (for 6 month policies).

We are pleased to propose additional payment options that allow greater flexibility and more choice for consumers. We propose an effective date of 09/29/2008.



- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

ONE GEICO PLAZA ■ Washington, D.C. 20076-0001 ■

August 28, 2008

Honorable Julie Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

Re: Government Employees Insurance Company (GEICO) NAIC# 22063
GEICO General Insurance Company NAIC# 35882
GEICO Indemnity Company NAIC# 22055
GEICO Casualty Company NAIC# 41491
Automobile Casualty Rate/Rule Manuals
File Number: **2008-112**

Dear Commissioner Bowman:

For your review, Government Employees Companies herewith files a revision to our Automobile Casualty Manual currently on file.

Specifically, we have revised the Installment Payment Plan rule to include two new payment plans to policyholders, each offering six installment payments during the six-month policy term.

Enclosed are revised manual pages. No pages are enclosed for GEICO General Insurance Company as we maintain a special page (GG-1) that states GEICO General rates and rules are identical to GEICO's.

Upon receipt of the enclosed, please forward your stamped acknowledgment for our records. We will implement this change for all policies effective on and after September 29, 2008.

Sincerely,

Christina A. Puglisi

Christina A. Puglisi
Analyst, State Filings
Phone (800) 824-5404 Ext 2352
Fax (301) 986-3922
cpuglisi@geico.com

Property & Casualty Transmittal Document (Revised 1/1/06)

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	GEICO			Group NAIC #	031
4. Company Name(s)	Domicile	NAIC #	FEIN #		
Government Employees Insurance Company	MD	22063	53-0075853		
GEICO General Insurance Company	MD	35882	75-1588101		
GEICO Indemnity Company	MD	22055	52-0794134		
GEICO Casualty Company	MD	41491	52-1264413		

5. Company Tracking Number	2008-112
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Christina A. Puglisi One GEICO Plaza Washington, DC 20076	Analyst, State Filings	800-824-5404 Ext. 2352	301-986-3922	cpuglisi@geico.com
7. Signature of authorized filer		Christina A. Puglisi		
8. Please print name of authorized filer		Christina A. Puglisi		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	19.0
10. Sub-Type of Insurance (Sub-TOI)	19.0001
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Private Passenger Automobile
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input checked="" type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 9/29/2008 Renewal: 9/29/2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	August 28, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	2008-112
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

For your review, Government Employees Companies herewith files a revision to our Automobile Casualty Manual currently on file.

Specifically, we have revised the Installment Payment Plan rule to include two new payment plans to policyholders, each offering six installment payments during the six-month policy term.

Enclosed are revised manual pages. No pages are enclosed for GEICO General Insurance Company as we maintain a special page (GG-1) that states GEICO General rates and rules are identical to GEICO's.

Upon receipt of the enclosed, please forward your stamped acknowledgment for our records. We will implement this change for all policies effective on and after September 29, 2008.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
Check #: EFT Amount: \$100.00	
Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.	

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

PC TD-1 pg 2 of 2

RATE/RULE FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	2008-112
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	N/A
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☐ Rate Increase ☐ Rate Decrease ☒ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File & Use
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4a.	Rate Change by Company (As Proposed)					
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Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
GEICO/GEICO General Insurance Co	N/A	N/A	N/A	N/A	NA	NA

4b.	Rate Change by Company (As Accepted) For State Use Only					
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Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5. Overall Rate Information (Complete for Multiple Company Filings only)			
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		COMPANY USE	STATE USE
5a	Overall percentage rate impact for this filing	N/A	
5b	Effect of Rate Filing – Written premium change for this program	N/A	
5c	Effect of Rate Filing – Number of policyholders affected	N/A	
6.	Overall percentage of last rate revision	-4.6%	
7.	Effective Date of last rate revision	NB 7/6/06 RNL 8/28/06	
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File and Use	

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	General Rules – Page 3	[] New [X] Replacement [] Withdrawn	
02		[] New [] Replacement [] Withdrawn	
03		[] New [] Replacement [] Withdrawn	

RATE/RULE FILING SCHEDULE

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1.	This filing transmittal is part of Company Tracking #	2008-112
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	N/A
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☐ Rate Increase ☐ Rate Decrease ☒ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File & Use
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4a.	Rate Change by Company (As Proposed)					
Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
GEICO Indemnity Company	N/A	N/A	N/A	N/A	NA	NA

4b.	Rate Change by Company (As Accepted) For State Use Only					
Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5. Overall Rate Information (Complete for Multiple Company Filings only)			
		COMPANY USE	STATE USE
5a	Overall percentage rate impact for this filing	N/A	
5b	Effect of Rate Filing – Written premium change for this program	N/A	
5c	Effect of Rate Filing – Number of policyholders affected	N/A	

6.	Overall percentage of last rate revision	-0.2%
7.	Effective Date of last rate revision	NB 7/6/06 RNL 8/28/06
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File and Use

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	General Rules – Page 3	[] New [X] Replacement [] Withdrawn	
02		[] New [] Replacement [] Withdrawn	
03		[] New [] Replacement [] Withdrawn	

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	2008-112
2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	N/A

☐ Rate Increase ☐ Rate Decrease ☒ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)		File & Use			
4a.	Rate Change by Company (As Proposed)					
Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
GEICO Casualty Company	N/A	N/A	N/A	N/A	NA	NA
4b.	Rate Change by Company (As Accepted) For State Use Only					
Company Name	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5. Overall Rate Information (Complete for Multiple Company Filings only)			
		COMPANY USE	STATE USE
5a	Overall percentage rate impact for this filing	N/A	
5b	Effect of Rate Filing – Written premium change for this program	N/A	
5c	Effect of Rate Filing – Number of policyholders affected	N/A	

6.	Overall percentage of last rate revision	4.9%
7.	Effective Date of last rate revision	NB 7/6/06 RNL 8/28/06
8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File and Use

9.	Rule # or Page # Submitted for Review	Replacement or withdrawn?	Previous state filing number, if required by state
01	General Rules – Page 2	[] New [X] Replacement [] Withdrawn	
02		[] New [] Replacement [] Withdrawn	
03		[] New [] Replacement [] Withdrawn	